Joseph DeFosse Testimony in support of DHMAS funding for the Appropriations Committee 2020

First, I would like to thank the committee members for their time and the opportunity to speak. My name is Joe and I am a person in long term recovery, which means I have not used any mind-altering substances since 6/5/2018. I am also a volunteer recovery coach and lead advocate at the Willimantic CCAR. I am an example of the strengths and weaknesses the system can have. Jail got me clean and I found my recovery at a CCAR recovery community center through my community service requirement, but that same system and the barriers it creates has made it so I have been unemployed while actively pursuing work for over a year, despite being a 4.0 student in a Master's program that checks all the boxes to be employable. As a grad student in I/O psychology with a research background, I am a big fan of numbers and data. I imagine many of you are as well considering your membership on the appropriations committee. Because of this I am going to stop talking about me and focus on the numbers that show why DMHAS needs to be adequately funded.

(Data is all from most recent reports available to public, not all from this past year, as you know these reports take time)

- 1 in 5 adults aged 18 or older had a mental illness (AMI) in the past year, and 4.1 percent had serious mental illness (SMI) (NHI, 2017).
- In 2017, there were an estimated 11.2 million adults aged 18 or older in the United States with SMI. This number represented 4.5% of all U.S. adults.
- In 2017, among the 46.6 million adults with AMI, 19.8 million (42.6%) received mental health services in the past year. (NHI, 2017).
- In 2017, among the 11.2 million adults with SMI, 7.5 million (66.7%) received mental health treatment in the past year. (NHI, 2017).
- The percentage of young adults aged 18-25 years with SMI who received mental health treatment (57.4%) was lower than adults with SMI aged 26-49 years (66.2%) and aged 50 and older (75.6%).(NHI, 2017).
- According to the National Survey on Drug Use and Health (NSDUH), 19.7 million
 American adults (aged 12 and older) battled a substance use disorder in 2017. (NSDUH),
- \$740 billion annually costs to U.S. economy related to crime, lost work productivity and health care from substance use disorder (NIDA, 2017).
- 8.6% of working adults have a substance use disorder, costing the country 74 billion in lost productivity from alcohol use alone (The National Safety Council, 2020).
- Roughly 50 percent of individuals with severe mental disorders are affected by substance abuse.
- 37% of alcohol abusers and 53% of drug abusers also have at least one serious mental illness.
- Of an estimated 20.7 million people age 12 and older that needed treatment for a substance use disorder in the last year only 19% actually received treatment. SAMHSA, 2018).

 Addiction is considered a highly treatable disease, and recovery is attainable. 10% of Americans are in recovery. New York State Office of Alcoholism and Substance Abuse Services, 2012).

In Connecticut

- In Connecticut 47.7% of all adults with a mental illness from 2011 to 2015 received mental health services in the past year. Less than half (SAMHSA, 2015).
- 4% of CT population Had Serious Thoughts of Suicide including 10% of people 18-25 SAMHSA, 2016-2017
- 8% of CT population Needing but not receiving treatment for SUD including 16% of people 18-25 SAMHSA, 2016-2017
- 65% if people in prison have SUD 75% of those 65% have cooccurring mental health disorder. (Sack, 2014).
- \$50262 is the cost per inmate in CT https://nicic.gov/state-statistics/2017/connecticut
- As of 2017, there are 14,164 inmates,5,246 DOC employees, and a DOC budget of \$847 million. (Nicic, 2017)
- 32% of inmates released or discharged from CT prison facilities were returned to prison within a year. Imagine if this money was spent on rehabilitation, rather than punishment nicic, 2017).

Ladies and gentlemen of the committee, numbers do not lie, and we clearly need to do better. DMHAS is our first line of defense against mental health and addiction in this state. Without proper funding, they can not do the important work the state desperately needs. I humbly ask that you take this into consideration when making decisions on how to disperse the states funding. Thank You.

Sources:

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